

DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES



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PO Box 4210
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Date: September 5, 2008

To: Living Life, LLC. (LL)

From: Chris Kleinsasser, Quality Improvement Specialist (QIS)

Re: Quality Assurance Review (QA)

RECEIVED
SEP 10 2008
DPHHS-DSD

This review will include information gathered for the time period of December 2007 to date to assess quality assurance of Living Life, LLC. LL agreed to a QA review sooner than required. The onsite review was conducted the week of July 7 & July 21, 2008.

Through this evaluation Quality Observation Sheets (QAOS) will be utilized to identify exceptional areas of service and commendation, or areas that are deficient and require immediate attention and improvement.

Living Life currently serves 11 consumers. Ten are in Supported Living services. One consumer receives Community Supports services and three receive Transportation services. They have been providing services to Developmentally Disabled consumers since January 2006. This agency is funded with Medicaid Title XIX dollars with the exception of three consumers who are General Fund.

LL is a for profit corporation who is required to follow fiscal contracting requirements. LL is payee to several consumers and report expenses and income to Social Security as needed. Other consumers served are monitored through a bonded bookkeeper. LL does not have to meet any licensing requirements at this time and has not had a financial audit to date. Staffing is adequate and meets the DDP requirements. LL is diligent about ensuring they are meeting the staffing needs of each individual served and this is clearly documented.

It is recommended that LL consider an audit to ensure that they are meeting all the financial obligations of the consumers served as well as ensuring systems in place will assist in ensuring the safety of consumer's funds.

LL owners are dedicated and committed to providing quality services to consumers served. This is evident through agency surveys and the survey conducted by the QIS for this QA review along with interactions throughout the year. Living Life is always looking for creative ways to assist consumers in meeting their needs with limited funds. This is done through reduced rates received through local businesses or participation in

a preferred activity in exchange for volunteer work. Consumers attend and participate in activities of their choosing and LL is open and willing to assist as needed. LL owners are to be commended for their hands on approach when working with consumers served. They know and work directly with all of the consumers served.

LL is to be commended for staff hours being covered according to consumers ICP's and then some as the need arises. LL has paid to have a counselor work with staff in assisting them in working with consumers with some challenging behaviors. LL is to be commended for their willingness to assist a base rate consumer who had some serious medical problems over the past few months in taking him out of state to get the medical care he needs. This has posed some strain on the provider as their infrastructure is small and consumer needs are high at times.

LL is challenged at times when suggestions/recommendations have been made by team members regarding certain consumers served. This can be counterproductive and impede success. All options should be considered and discussed in a professional manner even when team members disagree. Analyzed data has been requested over the past year on a consumer to better assess his needs and LL has not been consistent in producing and analyzing this data. Some data was graphed from Oct. to Jan. but none since. LL is commended for the efforts put into intervention protocols to redirect this consumer in an effort to avoid unwanted behaviors.

More attention and detail needs to go into incident management reporting. Incident reports are not detailed enough and reporting is scant in the sense that pertinent information is not presented in the initial stages of reporting. This has lead DDP to believe on more than one occasion that information may intentionally be being omitted.

Living Life provides Community Supports to one consumer who lives in with his family. LL works with him on preparing to live on his own in the next couple of years. The consumer and family work closely with LL and are happy with services received.

LL provides transportation services to three of the consumers. LL had not been billing Medicaid for transportation at the time of the review. They stated they were unaware of this. Medicaid will now be the first billing option for medical.

Overall, Living Life has proven to provide quality services to consumers served. Consumers are happy with their living arrangements and the supports and assistance that LL provides. It has been noted that if consumers are not happy and or have concerns, LL is committed to assist consumers in meeting their needs. The Regional Office is always available to assist and wants to encourage LL to contact us whenever needed. I want to take this opportunity to thank you and your staff for all your efforts to ensure consumer needs are being met.

For more detailed information refer to grid, quality assurance observation sheets and appendices.

Comprehensive Evaluation

Agency: Living Life

Evaluators: Chris Kleinsasser

DESK REVIEW: 9/5/2008

**Appendix
or QAOS**

Accreditation:

Accreditation is no longer required by the state contract.

Significant Events from the Agency:

Living Life, LLC (LL) has been providing services to Adults with Developmental Disabilities for almost 2 years now. They are currently qualified to provide Supported Living Services, Community Supports and Transportation. They currently provide services to 10 consumers, 3 of which have transitioned from MDC into the community. LL is to be commended for their willingness to serve consumers moving from MDC. They are committed to providing quality services to consumers served and this is demonstrated in the day to day lives of the consumers served and through their satisfaction indicated in surveys.

LL pays for a counselor to brainstorm and train staff at staff meeting on how to work with consumers and this is commendable. The counselor also sees these consumers on a regular basis. See QAOS

Staff to consumer hours are clearly documented and met. LL always goes above and beyond to ensure consumers are getting the hours they are required to have. When the need arises they are willing to cover in order to meet consumers needs. LL owners are not hesitant to assist and provide direct support to the consumers they serve. They are hands on and are directly involved with all the consumers they serve. See QAOS. Appendix A.

LL is challenged at times when suggestions/recommendations have been made by team members regarding certain consumers served. This can be counterproductive and impede success. All options should be considered and discussed in a professional manner even when team members disagree.

LL needs to collect and analyze data on behavioral intervention plans. This information has been requested by DDP for a specific consumer with severe behavioral challenges so the provider can assess the analyzed data to better meet the consumers needs and make changes as needed. Some of the information was generated, but needs to be continued, elaborated upon and reviewed regularly by the provider and report progress to the team so that changes can be made as needed. See QAOS

GQAOS1

App.A
GQAOS2

QAOS3

Agency Internal Communications Systems:

LL staff communicate effectively through emails, logs, weekly staff meetings, phones and during shift changes. There is a 24/7 on call system in operation.

Comprehensive Evaluation

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DESK REVIEW:	9/5/2008	Appendix or QAOS
<p>Fiscal (audits, cost plans, invoices):</p> <p>LL has not had an audit to date.</p> <p>They are payee for some consumers served and they also have a bookkeeper who is bonded and is payee to other consumers.</p> <p>See attached sample of account transactions and bank reconciliations for consumers. Appendix B.</p>		App.B
<p>Licensing:</p> <p>LL is not required to have any kind of licensing. They provide SL services only.</p>		

Comprehensive Evaluation

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Evaluators: Chris Kleinsasser

DESK REVIEW:	9/5/2008	Appendix or QAOS
Quality Assurance Observation Sheets: (trends from past year) <p>One issued 1/08 for leaving 24/7 consumer unattended. This was not part of the consumers plan.</p>		
Medication Errors: (trending from past year) <p>Since October of 2007: There were 3 medication errors in July for missed medications for AM and TJR.</p> <p>LL has reported there have been some pharmacy medication errors staff have immediately caught and brought to Apothecary's attention. LL is also looking at other pharmacy options. Kudos to LL for catching these medication errors. See QAOS</p>		GQAOS4
Incident Management: (summary trends, steps to address trends, investigation summaries) <p>Staff continue to write IR's that do not have enough detailed information. This was addressed in last years QA review and discussed at IM through the year. Critical incidents and reportable incidents are being reported via phone or email, but are brief and description of the incidents that occur are not being disclosed. Ex. "GM was physically aggressive towards staff last night and everyone is ok". Information not revealed was that restraints were done, staff were scratched, bit, shirt ripped off, emergency called and police and ambulance responded taking GM to IR, etc. Revealing specific detailed information is critical to planning for consumers served and required by DDP IM policy and Regional office needs to be aware of what is going on when reporting in the event assistance is needed. See QAOS</p> <p>LL currently has two Critical Investigators. It is recommended that more staff be certified due to the nature of some of the consumers served. Even though LL is a smaller provider they serve consumers that pose some challenging behaviors.</p>		QAOS5

Comprehensive Evaluation

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9/5/2008

Staff Related:						Appendix or QAOS
Evidence Found of Orientation Training (mark 'yes' if present, 'no' if not present)						
staff initials	CS	JR	AC	AB	JM	
yes/no	y	y	y	y	y	
Note where evidence found: Personnel files						
Evidence Found DDCPT or equivalent:						
staff initials						
yes/no	na	na	na	na	na	
Note where evidence found:						
Evidence of Criminal Background Checks:						
staff initials						
yes/no	y	y	y	y	y	
Note where evidence found: personnel files, staff training records, agency employment application						
Evidence of Staff Survey:						
staff initials						
yes/no	na	na	na	na	na	
Note where evidence found: Survey's are completed on a yearly basis and none of the staff reviewed have been there a year.						
Comments: (regarding staff hiring, screening, training, supervision)						
All staff who have worked at LL for more than six months had completed CDS.						

Comprehensive Evaluation

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9/5/2008

Staff Related:

Appendix
or QAOS

Evidence Found of Staff Training: (mark 'X' if present, 'no' if not present)

staff initials	CS	JR	AC	AB	JM		
1st aid/CPR	y	no	y	y	y		
Abuse Prevention	y	y	y	y	y		
Client Rights	y	y	y	y	y		
Incident Reporting	y	y	y	y	y		
Confidentiality	y	y	y	y	y		
IP/PSP Process	y	y	y	y	n		
CDS complete w/in 6 months of hire date?	n	y	y	n	n? QLC		
Medication Cert	n	y	n	y	??		

Note where evidence found:

Personel files. There are a couple of staff that continue to take their med test. They do not assist and supervise with medications at this time.

Comments:

Unless staff have signed off that they've had training it is not recognized as being completed.

One staff did not have CPR/FA certification in the required time frame.

See QAOS.

QAOS6

Comprehensive Evaluation

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9/5/2008

Note Site Reviewed:

IP Checklist: check if evidenced		SL	SL	SL	CSP	SL				Appendix or QAOS
Consumer Initials										
On Site	Consumer/Family Survey	y	y	y	y	y				
	PSP/IP Doc Avail to all Staff	y	y	y	y	y				
	IPP/Actions Implemented	y	y	y	y	y				
	Data for IPP/Actions	y	y	y	y	y				
	Data Internally Monitored	y	y	y	y	y				
	Self Medication Objective	y	y	na	na	na				
	Consumer informed of grievance procedure	y	y	y	y	y				
	SL consumer choice of SL staff	y	y	y	y	y				
	Rights Restrictions	na	na	na	na	na				
	PSP/IP Checklist									
CM INPUT	PSP/IP Annually?	y	y	y	y	y				
	Individual Needs Addressed?	y	y	y	y	y				
	Assessment Based?	y	y	y	y	y				
	Quarterly Reports?	y	y	y	y	y				
	Incident Reports Addressed?	y	y	y	none	y				
	Behavioral Supports Addressed?	y	y	na	na	na				
	Functional Analysis Needed?	na	na	na	na	na				
	Free from Aversive Procedures?	y	y	y	y	y				
Comments: (regarding service planning and delivery) LL uses a variety of assessments to assess individual's needs. The conduct a skills, vulnerability, medication and a community living assessment. Quartelies and data for and was difficult to obtain. It was suggested that the information be more organized and accessible. LL was aware of the concerns and were eager to fix them. LL realizes the importance of consumers choice of staff and are committed to ensuring that staff are liked and work well with consumers served. One of the ways they monitor this is through consumers completing a satisfaction survey on staff they work with. See QAOS Data sheets should reflect more detailed information such as: what cooked and what consumer did to assist in cooking. Data sheets are very detailed to include times, prompts, etc. Appendix C.										GQAOS7 App. C

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9/5/2008

Make note of site reviewed

Residential Site Checklist: check if evidenced or mark data as appropriate

Appendix
or QAOS

Site Name	TJR	AM	DH	GG	CW			
H e a l t h S a f e t y	Bathing procedures posted	y	na	na	na	na		
	Clean/Sanitary Environment	y	y	na	y	y		
	Egress	y	y	y	y	y		
	Hot Water Temps	na	na	na	na	na		
	Emergency Assistance	y	y	y	y	y		
	Fire Extinguishers/smoke Detectors	y	y	n	na	y		
	1st Aid/CPR Supplies Accessible/Available	y	y	n	na	y		
	PRN Medications	y	y	na	na	na		
	Medication Procedures	y	y	y	na	y		
	Medication Locked Storage	y	y	na	na	na		
	Medication Administration Records	y	y	y	na	y		
	Staff Ratios or ICP staffing	y	y	y	y	y		
	Awake Overnight Staff	y	y	na	na	na		
	Adequate Supplies	y	y	y	na	y		
D a i l y	Storage of Supplies	y	y	na	na	na		
	Free from aversive procedures?	y	y	y	y	y		
	Weekly integrated activities	y	y	y	y	y		
	House or Site Rules	y	y	na	na	na		
	Opp for choice, self determination	y	y	y	y	y		
	Meal Prep, Mealtime	y	y	na	na	na		
	Engagement in Daily Life	y	y	y	y	y		
	Participation in Daily Living Skills	y	y	y	y	y		
Daily Leisure Opportunities	y	y	y	y	y			
Staff Trained in Individual Specifics	y	y	y	y	y			
Comments: June smoke alarms were not marked checked for one individual. There is no evidence to indicate this has been done. See QAOS Details are necessary in safety checks on progress and recommendations noted if needed. See QAOS. Appendix D								QAOS8 App. D

Comprehensive Evaluation

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Residential Site Checklist: check if evidenced								Appendix or QAOS
Site Name	Tracker	Buick						
T r a n s p o r t a t i o n	Driver Orientation Program	y	y					
	Wheelchair tie downs	na	na					
	Wheelchair Lift	na	na					
	Driver's Licenses	y	y					
	Emergency Supplies	y	y					
	Fire Extinguisher	y	y					
	Transportation Log	y	y					
	Scheduled Maintenance Program	y	y					
	Training—Staff Doing Maintenance Checks	y	y					
	Procedures for Timely Repairs	y	y					
	MDT inspection on file (MDT vehicles only)	na	na					
Comments:								
<p>Comments:</p> <p>During this review it was discovered that LL was not billing medicaid for transportation. They stated they were unaware that they should be doing this. LL plans to bill medicaid for allowable transportation costs.</p>								

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9/5/2008

Staff Survey: check if 'met', 0 if 'unmet'								Appendix or QAOS	
Staff Initials	CS	JR	BT	AB	JM				
A	Allegations are reported to? (APS)								
	Do you notify Supervisor first? (NO)								
	Steps to take if abuse is discovered?								
	Comments:								
L	Suspect theft of gloves, steps to take?								
	IP/PSP requests Doctors appt								
	No jacket, -25 consumer wants to leave								
	Review Rts Restriction								
b	describe consumer behaviors								
	staff response to behaviors by plan								
	list proactive or environmental strategies								
	Comments:								
O	former employee wants info								QAOS9 QAOS10
	what is consumer information?								
	training to meet health and safety needs?								
	emergency evacuation procedures?								
Comments:									
Some staff interviewed were not clear on abuse reporting procedures. See QAOS									
Staff that work with GM were unaware of 2 of his rights restrictions. See QAOS									
Not all staff are trained to do emergency evacuations. Thorough documentation of recommendations is needed.									

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9/5/2008

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer

Appendix
or QAOS

Staff, Initials		CS	JR	BT	AB	JM			
medications	describe procedure to assist with meds	no cert	y			y			
	if med is unavailable?		y		y				
	if gave wrong med?			y					
	if moving to a new place or gets new med?								
	requirement to assist with meds?			y					
	describe PRN or OTC is to be given				y				
	what constitutes a med error?					y			
Comments:									
ERC	steps to avoid power struggles	y		y	y				
	how to respond to someone who is upset		y			y			
	what is you start to lose control?	y	y		y	y			
	Comments:								
documentation	when do you fill out an incident report?	y	y	y		y			
	notifications for ER?			y					
	consumer to consumer incidents		y		y				
	who writes the IR?	y			y	y			
	Comments:								

Comprehensive Evaluation

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9/5/2008

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer								Appendix or QAOS
Staff Initials		CS	JR	BT	AB	JM		
Bob	consumer destroying things		y	y	y			
	staff pinches consumer back	y	y		y	y		
	how do you know a support plan is needed?			y		y		
	Comments:							
IP/PSP	what is IP/PSP based on?			y		y		
	you have an idea for an objective.....		y	y	y	y		
	why do assessments?	y	y		y			
	How do you find out what someone would like to do?	y						
Comments:								
Comments:								

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9/5/2008

Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not asked. Bolded questions are mandatory

Appendix
or QAOS

Consumer initials							
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)	y	y	y	y			
Do you have nice staff at home/work?	y	y	y		y		
Is anyone mean to you at home/work?	PJ home	y	n		n		
Do you like where you live/work?		y	y				
Are you ever afraid of anyone?	n	n	n				
Someone hits/hurts you, who can you tell?	kim	staff	cops	parents	police		
Does anyone talk to you about this?	n	y	y	parents	n		
Can you get help when you need it?		y	y				
from staff?		y	y				
from Case Manager?		y	y				
Can you get your own food/drink?	y	y	y				
Do people come into your house/room w/o knocking/permission?		y AM	n				
Do staff ever take things from you?	n	n	n				
Can you get rides to places you need to go?	y	y	y				
Rides to the places you want to go?		y	y				
Who is your Case Manager?	unknown	unknown	vl	lf	lf		
Does s/he talk to you about waiver services?	n	y	y	y	y		
Does s/he help you get what you need?	y	y	y	y	y		

Comments:

All consumers interviewed indicated they are happy with services and feel that their needs are being met.

Two consumers who reside together (AM and TJR) made it clear that their relationship (living together) was not working out. Living Life acted on this quickly and has found a home that allows for TJ and Ann to have their own place, but allows for necessary staff supports at this time.